

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>05 - 31 - '05</u>		2 Serial/Patent # <u>10 / 529, 624</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal			\$
	Petition			\$
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
<div style="border: 1px solid black; padding: 2px; background-color: #f0f0f0;">           Claim for the Small Entity            filed within two month         </div>		7 TOTAL AMOUNT OF REFUND		\$
10 REASON:		8 TO BE REFUNDED BY: <u>\$615.00</u>		
<input checked="" type="checkbox"/> Overpayment <input type="checkbox"/> Duplicate Payment <input type="checkbox"/> No Fee Due (Explanation):		Treasury Check  Credit Deposit A/C #: <div style="border: 1px solid black; display: inline-block; padding: 2px;">             9   0   8   --   1   6   4   1           </div>		
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>S. Ahmed.</u>		TITLE: <u>Paralegal</u>		
SIGNATURE: <u><i>S. Ahmed</i></u>		PHONE: <u>308 - 9140 #208</u>		
OFFICE: <u>PCT DO/EO</u>				
*****				
THIS SPACE RESERVED FOR FINANCE USE ONLY:				
APPROVED: _____		DATE: _____		

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*